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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Thomas Ryan et al.

Serial No.: 10/674,453 Art Unit: 3731

Filed: September 30, 2003 Examiner: N/A

FOR : ELECTROSURGICAL INSTRUMENT AND METHOD FOR TRANSECTING AN

ORGAN

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Qan 7, 200 4 (Date of Deposit)

Melissa J. Szanto

(Name of applicant, assignee, or Registared Representative)

(Signature)

(Date of Signature)

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

## SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Thomas Ryan et al. entitled Electrosurgical Instrument And Method For Transecting An Organ attorney Docket No.GYN-5009, to complete, pursuant to Rule 51, this application filed on September 30, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/GYN-5009/MJS in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/GYN-5009/MJS. This sheet is submitted in triplicate.

Respectfully submitted,

Melissa J. Szánto Reg. No. 40,834

Attorney for Applicant(s)

Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 (732) 524-1365

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Fit.	DECI	ARATION	_	Attorney Do	cket Number	GYN-5009	
		AND OF ATTORNEY		First Named	Inventor	Thomas Ryan	
1		ITY OR DESIGN			COMPLE	TE IF KNOWN	
		APPLICATION CFR 1.63)		Application	Number	10/674453	
_	claration Submitted with	OR Initial Filing (Su	rcharge	Filing Date		September 30, 20	)03
		(37 CFR 1.16(e)	) required)	Group Art U	nit	N/A	
		r, I hereby declare that		Examiner N	ame	N/A	
1 believe	e I am the original, firs ames are listed below	ss, and citizenship are a st and sole inventor (if o v) of the subject matter v	nly one nam	e is listed belo	ow) or an origin	al, first and joint inv	entor (if ention
	ELECTRO	SURGICAL INSTRUME	ENT AND ME		TRANSECTING	AN ORGAN	
the spec	cification of which						
☐ is a	attached hereto						
OR							
		(YYY) 09/30/2003 as Ur d was amended on (MM			mber or PCT Ir	nternational Applica	ition
		iewed and understand t t specifically referred to		of the above i	dentified specif	ication, including th	e claims, as
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inventor United S or inven priority i	's certificate, or 365(a States of America, list tor's certificate, or an s claimed.	benefits under 35 U.S.  a) of any PCT internation  ted below and have also  y PCT international app	nal applicati o identified b olication havi	on which design elow, by checting a filing date	gnated at least king the box, ar e before that of	one country other the strength of the specific	han the on for patent which
/	rior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime	d Certified Attac	
LLJ Ad	ditional foreign applic	cation numbers are lister	d on a suppl	emental priori	ty data sheet P	I O/SB/02B attache	a hereto:

DECLAR	RATION - Utility or Design Patent Ap	plication
	2. 119(e) of any United States provisional a	pplication(s) listed below.
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
as the subject matter of each of the claims provided by the first paragraph of Title 35, defined in Title 37, Code of Federal Regula national or PCT international filing date of the state		r United States application in the manner e duty to disclose material information as filing date of the prior application and the
Application Serial No.	Filing Date	Status
		Patented Patented Patented
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as my/our attorney(s) or agent(s) to prose States Patent and Trademark Office conr	ecute the application identified above, and nected therewith.	to transact all business in the United
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	mer Number r Code Label 000027777 OR	☐ Correspondence address below
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Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

S.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) Thomas or Surname Ryan Inventor's Signature Date Residence: City Flemington State N.J. Country U.S.A. Citizenship U.S.A. Mailing Address 16 Fieldstone Place **ZIP** 08822 Flemington State N.J. Country U.S.A. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor **Given Name Family Name** (first and middle [if any]) Rebecca or Surname Leibowitz Inventor's Signature Date Residence: City Scotch Plains State N.J. Country U.S.A. Citizenship U.S.A. Mailing Address 2094 Princeton Avenue City Scotch Plains State N.J. **ZIP** 07076 Country U.S.A. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF THIRD INVENTOR: ☐ A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) Roddi J. or Surname Simpson Inventor's Signature Date Residence: City Watchung State N.J. Country U.S.A. Citizenship U.K. Mailing Address 679 Mountain Boulevard, #3 City Watchung State N.J. **ZIP** 07069 Country U.S.A.

I hereby declare that all statements m information and belief are believed to that willful false statements and the lik U.S.C. 1001 and that such willful false issued thereon.	be true; and further se so made are pun	that these statishable by find	atements wer e or imprison	re made with the knowledge ment, or both, under 18
NAME OF FOURTH INVENTOR:	☐ A pe	etition has been f	iled for this unsi	gned inventor
Given Name (first and middle [if any]) James S.		Family Name or Surname	Gatewood	
Inventor's Signature Anna Day	town		Date //	-19-2003
Residence: City Chesapeake	State VA	Coun	try U.S.A.	Citizenship U.S.A.
Mailing Address 601 San Pedro Drive				
City Chesapeake	State VA	ZIP	23322	Country U.S.A.

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PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## **DECLARATION** AND **POWER OF ATTORNEY** FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitte	ed with 🛛	Declaration Submitted after
Initial Filing	OR	Initial Filing (Surcharge
		(37 CFR 1.16(e)) required)

Attorney Docket Number	GYN-5009
First Named Inventor	Thomas Ryan
COMPLE	TE IF KNOWN
Application Number	10/674453
Filing Date	September 30, 2003
Group Art Unit	N/A
Examiner Name	N/A

## As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

<b>ELECTROSURGICAL INSTRUMI</b>	ENT AND METHOD F	FOR TRANSECTING AN ORGAN
	(Title of the Invention)	<b>)</b>

(Title of the Invention)
the specification of which
is attached hereto
OR
was filed on (MM/DD/YYYY) 09/30/2003 as United States Application Number or PCT International Application Number 10/674453 and was amended on (MM/DD/YYYY)
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, a amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Attach YES	
4					

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLAR	RATION - Utility or Design Patent App	plication
I hereby claim the benefit under 35 U.S.C	c. 119(e) of any United States provisional a	oplication(s) listed below.
Application Number(s)	Filing Date (MM/DD/YYYY)	
		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
	nited States Code, §120 of any United States of this application is not disclosed in the prior	
provided by the first paragraph of Title 35,	United States Code, §112, I acknowledge the ations, §1.56(a) which occurred between the	e duty to disclose material information as
Application Serial No.	Filing Date	Status
		Patented Patented Patented
I hereby appoint:		
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	omer Number r Code Label 000027777 OR	☐ Correspondence address below
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Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

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I hereby declare that all statements mean information and belief are believed to that willful false statements and the lift U.S.C. 1001 and that such willful false issued thereon.	be true; and further ke so made are pun	that these sta	itements were r or imprisonme	nade with the knowledge int, or both, under 18
NAME OF SOLE OR FIRST INVENTOR:	☐ A pe	etition has been fi	led for this unsigne	d inventor
Given Name (first and middle [if any]) Thomas		Family Name or Surname	Ryan	
Inventor's Signature			Date 191	OV 0 3
Residence: City Flemington	State N.J.	Coun	try U.S.A.	Citizenship U.S.A.
Mailing Address 16 Fieldstone Place	·			
<b>City</b> Flemington	State N.J.	ZIP (		Country U.S.A.
I hereby declare that all statements meaning information and belief are believed to that willful false statements and the lill U.S.C. 1001 and that such willful false issued thereon.	be true; and further ke so made are pun	r that these sta ishable by fine	atements were r e or imprisonme	made with the knowledge ent, or both, under 18
NAME OF SECOND INVENTOR:	A pe	etition has been fi	led for this unsigne	ed inventor
Given Name (first and middle [if any]) Rebecca		Family Name or Surname	Leibowitz	
Inventor's Rubucca 7	cibonely		Date 21	Nov 03
Residence: City Scotch Plains	State N.J.	Coun	try U.S.A.	Citizenship U.S.A.
Mailing Address 2094 Princeton Avenue				
City Scotch Plains	State N.J.	ZIP_(	07076	Country U.S.A.
I hereby declare that all statements no information and belief are believed to that willful false statements and the li U.S.C. 1001 and that such willful false issued thereon.	be true; and furthe ke so made are pur	r that these sta nishable by find	atements were e or imprisonme	made with the knowledge ent, or both, under 18
NAME OF THIRD INVENTOR:	□Ар	etition has been f	iled for this unsign	ed inventor
Given Name (first and middle [if any]) Roddi J.		Family Name or Surname	Simpson	
Inventor's Signature			Date \\ \	119/03
Residence: City Watchung	State N.J.	Cour	itry U.S.A.	Citizenship U.K.
Mailing Address 679 Mountain Boulevard,	#3			
City Watchung	State N.J.	ZIP	07069	Country U.S.A.

I hereby declare that all statements information and belief are believed to that willful false statements and the U.S.C. 1001 and that such willful false issued thereon.	o be true; and further ike so made are pun	that these sta ishable by fine	tements we or imprisor	re made with the knowledge nment, or both, under 18
NAME OF FOURTH INVENTOR:	☐ A pe	etition has been fil	ed for this uns	igned inventor
Given Name (first and middle [if any]) James S.		Family Name or Surname	Gatewood	
Inventor's			Date	
Signature				

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